UNITED PIONEER HOME

210	PARK	AVENUE	
LUCE	ζ		54853

Phone: (715) 472-2164 Ownership: Nonprofit Church/Corporation Highest Level License: Skilled Operated from 1/1 To 12/31 Days of Operation: 365 Operate in Conjunction with CBRF? Operate in Conjunction with Hospital? No Number of Beds Set Up and Staffed (12/31/05): 75 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/05): 75 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/05: 62 Average Daily Census: 64

Age, Gender, and Primary Diagnosis	Length of Stay (12/31/05)							
Primary Diagnosis	8	Age Groups 	* 	 Less Than 1 Year 1 - 4 Years	30.6			
Developmental Disabilities	0.0	Under 65	1.6	More Than 4 Years	33.9			
Mental Illness (Org./Psy)	45.2	65 - 74	1.6					
Mental Illness (Other)	0.0	75 - 84	29.0		100.0			
Alcohol & Other Drug Abuse	0.0	85 - 94	56.5					
Para-, Quadra-, Hemiplegic	0.0	95 & Over	11.3	Full-Time Equivalent				
Cancer 0.0			Nursing Staff per 100 R					
Fractures	0.0		100.0	(12/31/05)				
Cardiovascular	8.1	65 & Over	98.4					
Cerebrovascular	16.1			RNs	13.1			
Diabetes	1.6	Gender	%	LPNs	8.5			
Respiratory	8.1			Nursing Assistants,				
Other Medical Conditions	21.0	Male	35.5	Aides, & Orderlies	41.6			
		Female	64.5					
	100.0							
			100.0					

Method of Reimbursement

		Medicare 'itle 18			edicaid itle 19			Other			Private Pay	2		amily Care			anaged Care	L		
Level of Care	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	2	5.0	137	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	3.2
Skilled Care	2	100.0	320	36	90.0	117	0	0.0	0	20	100.0	142	0	0.0	0	0	0.0	0	58	93.5
Intermediate				2	5.0	97	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	3.2
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependen	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	2	100.0		40	100.0		0	0.0		20	100.0		0	0.0		0	0.0		62	100.0

Admissions, Discharges, and	Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/05									
Deaths During Reporting Period	 		Total							
Percent Admissions from:		Activities of	%		% Needing sistance of	% Totally	Number of			
Private Home/No Home Health	9.3	Daily Living (ADL)	Independent	One	or Two Staff	Dependent	Residents			
Private Home/With Home Health	13.0	Bathing	0.0		66.1	33.9	62			
Other Nursing Homes	1.9	Dressing	14.5		35.5	50.0	62			
Acute Care Hospitals	75.9	Transferring	37.1		33.9	29.0	62			
Psych. HospMR/DD Facilities	0.0	Toilet Use	30.6		38.7	30.6	62			
Rehabilitation Hospitals	0.0	Eating	71.0		12.9	16.1	62			
Other Locations	0.0	*******	******	*****	******	******	*****			
Total Number of Admissions	54	Continence		8	Special Treatmen	ts	왕			
Percent Discharges To:		Indwelling Or Extern	nal Catheter	6.5	Receiving Resp	iratory Care	4.8			
Private Home/No Home Health	30.2	Occ/Freq. Incontiner	nt of Bladder	37.1	Receiving Trac	heostomy Care	0.0			
Private Home/With Home Health	20.8	Occ/Freq. Incontiner	nt of Bowel	27.4	Receiving Suct	ioning	0.0			
Other Nursing Homes	3.8	_			Receiving Osto	my Care	6.5			
Acute Care Hospitals	7.5	Mobility			Receiving Tube	Feeding	0.0			
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	4.8	Receiving Mech	anically Altered Diets	19.4			
Rehabilitation Hospitals	0.0				_	-				
Other Locations	0.0	Skin Care			Other Resident C	haracteristics				
Deaths	35.8	With Pressure Sores		1.6	Have Advance D	irectives	74.2			
Total Number of Discharges		With Rashes		4.8	Medications					
(Including Deaths)	53	İ			Receiving Psyc	hoactive Drugs	56.5			

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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		Own	ership:	Bed	Size:	Lic	ensure:		
	This	Non	profit	50	-99	Ski	lled	Al	1
	Facility	Peer	Peer Group % Ratio		Group	Peer	Group	Faci	lities
	%	%			% Ratio		Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	85.3	88.2	0.97	86.9	0.98	86.0	0.99	88.1	0.97
Current Residents from In-County	96.8	78.9	1.23	73.2	1.32	74.9	1.29	77.6	1.25
Admissions from In-County, Still Residing	31.5	21.3	1.48	20.6	1.53	19.6	1.61	18.1	1.74
Admissions/Average Daily Census	84.4	131.9	0.64	123.3	0.68	139.3	0.61	162.3	0.52
Discharges/Average Daily Census	82.8	132.7	0.62	123.8	0.67	139.6	0.59	165.1	0.50
Discharges To Private Residence/Average Daily Census	42.2	51.9	0.81	53.9	0.78	64.3	0.66	74.8	0.56
Residents Receiving Skilled Care	96.8	96.4	1.00	96.4	1.00	96.4	1.00	92.1	1.05
Residents Aged 65 and Older	98.4	95.6	1.03	93.0	1.06	92.9	1.06	88.4	1.11
Title 19 (Medicaid) Funded Residents	64.5	68.6	0.94	69.6	0.93	69.8	0.92	65.3	0.99
Private Pay Funded Residents	32.3	22.7	1.42	20.3	1.59	19.0	1.70	20.2	1.60
Developmentally Disabled Residents	0.0	0.5	0.00	0.7	0.00	0.7	0.00	5.0	0.00
Mentally Ill Residents	45.2	37.6	1.20	37.2	1.21	34.7	1.30	32.9	1.37
General Medical Service Residents	21.0	18.0	1.17	19.6	1.07	21.9	0.96	22.8	0.92
Impaired ADL (Mean)	51.0	46.8	1.09	46.7	1.09	47.4	1.08	49.2	1.04
Psychological Problems	56.5	58.4	0.97	57.3	0.99	59.0	0.96	58.5	0.97
Nursing Care Required (Mean)	4.6	6.9	0.67	6.7	0.69	7.2	0.65	7.4	0.62